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the basis of the periodic arrangement of elements. The aim should be to impress upon the student that there is order and system in it all, getting away from poll parrot memorizing.

Organic chemistry can be used to introduce the simpler substances; paraffines, etc., alcohols, aldehydes, ketones, acids, ethers, etc., their similarity to inorganics in structure; leading on to sugars, fats, etc.

Proteids and their derived products, their effects in producing fatigue, should be compared with materia medica substances. The similarity or dissimilarity in structure and physiologic action, should be brought forth.

The same methods can be pursued in presenting bacteriology, or rather micro-biology, correlating it with the other subjects taught. The clinical pathology phases should be brought into this course. The tests and examinations which the students are continually hearing mentioned and seeing reported, should be explained from a chemic and physiologic view.

Third year nurses who have had preliminary courses, as partly outlined above, should have the option of a course in practical laboratory work. Such a course should enable them to understand the limits of their ability as well as the extent of the same. Such a course will not make pathologists or expert technicians of them; it will make their work more interesting and will increase their ability. It will afford them the opportunity to be able intelligently to decide whether they care to go further and qualify as laboratory technicians.

With the rapid extension in the field of technical or laboratory diagnosis, the demand for technicians will no doubt increase. We believe that this field is one for which the training schools should seek to prepare their students; at least in such a manner that they can later take technician courses to advantage.

FOUR WEEKS OF INFLUENZA IN A MINING CAMP

BY MAMIE ELLINGTON THORNE

Oakley, Idaho

After my discharge from the army, I married and came west to a mining camp where my husband is employed. The elevation of the mine is near nine thousand feet; it is practically a new mine, and the company has been in operation a little less than a year. We are some thirty miles from the nearest railroad station, and there is no telephone through yet. Only in good and dry weather can cars get up to these mountains, and then after a hard and steady pull up grade for many miles.

Last winter all the freighting and most of the passenger service was done by horses. The teamsters used from four to eight horses on one wagon, where the snow was deepest, and never made the trip in less than from three to four days. There are about two hundred people employed here. There are not a great many conveniences, but two which I have in my little house, and enjoy, are water and electricity.

There was no hospital equipment here of any kind, and no provision for taking care of the sick. My husband had been asked to get a few emergency supplies, he being the only person in camp with any hospital or medical knowledge. The two doctors of the nearest little town refused to come up to the camp on calls, because of the exceedingly rough and dangerous roads. One of them had attempted it once and had run his car over a high embankment, barely escaping with his life.

I was sometimes called upon to go to see a sick baby, or perhaps the mother would walk a mile, bringing it to see me. A few times I was called to help when men were gassed, and sometimes to do a dressing. All went well until the first of January, when the influenza at last "flew" into our midst. I suspect it was brought in by those returning from holidays, or by miners who constantly go and come. At any rate, several persons became ill, and each day there were from one to four new cases.

The mine authorities held a meeting, after which they asked us if we would try to cope with the situation. We agreed to do our best. We were permitted to order any drug or hospital supplies we felt were necessary, and a hospital fund was arranged for us as compensation for our work. A small hospital ward and drug room were soon fitted up, where we took a few of the sickest men for a few days so as to get them away from others in the "bunk" houses, which, I am sorry to say, were badly crowded even for well people.

We asked that every new case send a report to the office each morning after eight o'clock, or as soon as he quit work, if during the day. The drug room was always open at noon, and again for a half-hour or more in the evening, as was necessary. We soon got quite a complete supply of medicine except, of course, that coming under the Harrison law.

Three times a day, and sometimes oftener, we took a tray of medicine and made the rounds to each "bunk" house, trying to supply the needs and demands of the men. It seemed at times like the epidemic which we had gone through in the army camp, though on a small scale, but I am happy to state that here we had no deaths. We took the temperatures, put the patients to bed, and gave what medicine we

thought their condition demanded. The first thing was always a good cathartic. Castor oil seemed to give better results than calomel and salts, or pills. The general rule was to give the patient aspirin, 5 grains, and quinine, 3 grains, or cold tablets, alternating, giving one every two hours, or in some light cases every three hours. We always asked about the throat and chest, and left a gargle with strict orders to use it, whether or not the throat at that time was sore. We used mustard or menthol preparations for external application to throat and chest, and often for severe backache. We insisted that quantities of water and lemonade or other fruit juice, if possible, be drunk.

Most of the medication was lessened after twenty-four or thirty-six hours, and a liquid or soft diet given. The men, as a rule, were very good about taking their medicine, and their friends in waiting upon them. As all the diets were carried from the boarding house kitchen by the friends or "pals" of those sick, I gave strict orders as to the diet in the kitchen, which I have reason to believe were carefully carried out.

This epidemic lasted only four weeks or a little less, with the exception of a stray case now and then. We took care of sixty-five cases during this time. Most of the men returned to work in from seven to ten days, and but few were in bed more than three to five days.

None developed pneumonia, and only three had temperatures of 104° F., and then only for a few hours. There was only one woman patient, who complained so much of her chest, that we sent her to a lower altitude for fear of pneumonia, but in a few days she, too, was all right. The other complication was mostly tonsillitis, in addition to the nose and throat troubles that usually accompany influenza. There were about eighteen or twenty that seemed to be typical tonsillitis cases, two of which developed into quinzy, but both boys had been subject to it. One case that seemed not to yield to any treatment we could give, was started to the doctor, but the tonsil "broke" before he got there, giving instant relief.

We had one case of a middle aged man who seemed to have neuralgia in the left side of his face. This, of course, was very painful, and lasted for several days in spite of all we could do. I think a great deal of his trouble was caused by poor teeth and no care. He said he had not used a tooth brush in ten years until we insisted upon it.

Conditions up here are not as yet governed by laws of sanitation, but we did our best under the conditions, and fumigated each room as soon as it was cleared of the sick.

In a place of this sort the men are expected to furnish their own

bedding. The company furnishes only the bed, springs, and mattress, as the miners are constantly changing situations. Some have blankets that reek with dirt and filth, while the bed next may be clean, and may even have a white spread.

We still continue with the dispensary, and scarcely a day passes that we do not dress some scalp wound or crushed finger, or some such minor thing, as so many get hurt in the mine. However, it has all been a new and interesting experience to me.

NURSES FROM A PATIENT'S STANDPOINT

By F. B.

I know people who regard the professional nurse as a person whose training has left her entirely devoid of humane and gentle qualities. I know others who think she is an ethereal being who flits from bed to bed whispering soothing words to the dying and the maimed. Both of these pictures are true. There are nurses who treat their patients as a mechanic treats a piece of machinery. Others seem to have been born to succor and to bless. I speak from experience as a patient, my life, so far, having been one long struggle against disease. I have been ill, seriously ill, so many times and from so many different causes that my medical history has been called unique. I have been "a medical case" and "a surgical case" about an equal number of times, and I know the nurses, doctors and hospitals of two lands. I do not mention this because I think it something to be proud of, for it is rather humiliating for a man of my stature and ambitions to have to be carted around in wheeled chairs and shielded from harm by maidens whom he would ordinarily hasten to protect, but to show that my experience as a patient is sufficiently varied to qualify me to speak on the subject of nurses.

It is not long since any old kind of nurse was considered good enough, and nursing as a profession was shunned by women of education and refinement. In the history of one of the great European hospitals which I read some years ago, it was stated that fines were exacted from patients who swore at the nurses or threw things at them. One can imagine from this the class of women engaged—and of the patients, too! To-day it is recognized that a good nurse is as important as a good doctor.

I feel, however, as I lie here on my back, hardly able to raise my head from the pillow, and realize all that is being done for me by the woman into whose care my person has been committed—autocrat though she be!—that the nurse is entitled to fully two-thirds of the